⋖	2	
v	30	
C	<u> </u>	

Ū
T
m
J
TJ.
2
J
TJ
ø

Attorney Docket No.	
First	
SUSHI IKEDA, ET	

862.C1937 t Named Inventor or Application Identifier

() I KANSWII I AL		.,	ATSUSHI IKEDA, ET AL.			
E gonly	gOnly for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail Label No.		2/	
C.					000000000000000000000000000000000000000	
APPLICATION ELEMENTS  To See MPEP chapter 600 concerning utility patent application contents.			ASSISTANT Commissioner for Patents  Box Patent Application Washington, DC 20231			
1. X Fee Transmittal Form (Submit an original, and a duplicate for fee processing)			6. Microfiche Computer Program (Appendix)			
2. X 3. X 4. X	Specification Total Pages 109  Drawing(s) (35 USC 113) Total Sheets 24  Oath or Declaration Total Pages 2	]	b	essary) Computer Readable Paper Copy (identic		
	a. X Newly executed (original or copy)		ACCO	MPANYING APPLIC	CATION PARTS	
Varid	b. Unexecuted for information purposes  c. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 17 complete [Note Box 5 below]  i. DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior applica 37 CFR 1.63(d)(2) and 1.33(b).  Incorporation By Reference (useable if Box 4c is checked) The entire disclosure of the prior application, from which a company the declaration is supplied under Box 4c, is considered by the accompanying application hereby incorporated by reference therein.	ACCOMPANYING APPLICATION PARTS  8. X Assignment Papers (cover sheet & document(s))  9. 37 CFR 3.73(b) Statement Power of Attorney  10. English Translation Document (if applicable)  11. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations  12. Preliminary Amendment  13. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  14. Small Entity Statement filed in prior application Statement(s) Status still proper and desired  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Other:				
				-		
17. If a	CONTINUING APPLICATION, check appropriate box and Continuation Divisional Continu		10000	olication No		
	40,000	DECDO	IDENOE ADDRESS			
-	18. CON	KESPUN	IDENCE ADDRESS		<del></del>	
х	Customer Number or Bar Code Label (Insert Custome		514 tach bar code label here)	or Corre	spondence address below	
NAME				***		
Address			·			
City	CALA			Zin Code		
Country	State Telephone			Zip Code Fax		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	58-20 =	38	X \$ 18.00 =	\$ 684.00
	INDEPENDENT CLAIMS (37 cfr 1.16(b)	18-3 =	15	X \$ 78.00 =	\$ 1170.00
	MULTIPLE DEPENDENT CLAIMS (if applica		CFR 1.16(d))	\$ 260.00 =	\$ 0.00
				BASIC FEE (37 CFR 1.16(a))	\$ 690.00
			Total of	above Calculations =	\$ 2544.00
	Reduction	1.27, 1.28).			
				TOTAL =	\$ 2544.00
a. b. c.	A sma	all entity statement is enclose all entity statement was filed esired. onger claimed.		nal application and su	ch status is still prope
20.	X A check in the	amount of \$ <u>2544.00</u> to cov	er the filing fee is enclos	sed.	
21.	X A check in the	amount of \$ <u>40.00</u> to cove	r the recordal fee is encl	losed.	
22. TI N	he Commissioner is he o. 06-1205:	ereby authorized to credit over	erpayments or charge th	e following fees to De	eposit Account
а.	X Fees	required under 37 CFR 1.16.			
b.	Fees	required under 37 CFR 1.17.			
C.	Fees	required under 37 CFR 1.18.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Justin J. Oliver - Reg. No. 44,986			
SIGNATURE	gut Olm			
DATE	June 29, 2000			

JJO\cmv

+